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25943

7590

06/10/2004

SCHWABE, WILLIAMSON & WYATT, P.C.
 PACWEST CENTER, SUITES 1600-1900
 1211 SW FIFTH AVENUE
 PORTLAND, OR 97204

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Heather L. Adamson	(Depositor's name)
<i>Heather L. Adamson</i>	(Signature)
09/02/2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/087,877

03/01/2002

David R. Ohm

51040 P025

6251

TITLE OF INVENTION: INDIRECT MONITORING OF SEMICONDUCTOR LIGHT SOURCE WITHIN A PHOTONIC PACKAGE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	09/10/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
MEYER, DAVID C	2878	250-239000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 SCHWABE, WILLIAMSON2 & WYATT, P.C.

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Network Elements, Inc.

Beaverton, OR

Please check the appropriate assignee category or categories (will not be printed on the patent);

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(Authorized Signature)

(Date)

James J. Namiki, Reg. No. 51,148 09/02/2004

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09/08/2004 WASFAW2 00000165 10087877

01 FC:2501
 02 FC:1504
 03 FC:8001

665.00 OP
 300.00 OP
 30.00 OP



PTO/SB/21 (02-04)

Approved for use through 07/31/2006. OMB 0651-0031

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/087,877	
	Filing Date	03/01/2002	
	First Named Inventor	David R. Ohm	
	Art Unit	2878	
	Examiner Name	Meyer, David C.	
Total Number of Pages in This Submission	3	Attorney Docket Number	109897-129956

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	SCHWABE, WILLIAMSON & WYATT, P.C.
Signature	
Date	09/02/2004

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Typed or printed name		Heather L. Adamson	
Signature		Date	09/02/2004

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